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FEC FORM 3P

REPORT OF RECEIPTS **AND DISBURSEMENTS**

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

T OIT THE OIT TOE OF T	TIEODEIVI ON VIOLITIEOD	Office Use Only
1. NAME OF COMMITTEE (in full, type or print	Example: If type	oing, type over the lines. 12FE4M5
Chris Dodd For President Inc		
ADDRESS (number and street)) PO Box 270701		
PO Box 270701		
Check if different than previously reported. (ACC West Hartford	CITY	CT 06127 STATE ZIP CODE
2. FEC IDENTIFICATION NUMBER C	C00431379 3. TH	IS REPORT IS FOR Primary X or General X
4. TYPE OF REPORT (Choose One)		Check here if this is a Termination Report (TER)
Quarterly Reports:		Monthly Reports:
X April 15 (Q1) October 15 (Q3)	Feb 20 (M2)	May 20 (M5) Aug 20 (M8) Nov 20 (M11)
July 15 (Q2) January 31 Year-End Repor	t (YE) Mar 20 (M3)	Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
	Apr 20 (M4)	Jul 20 (M7) Oct 20 (M10)) Jan 31 (YE)
Thirtieth day report following the General Elect		t preceding election election in the State of .
Is this Report an Amendment? X yes no		
5. Covering Period 01 01	2011 through	03 / D D / Y Y Y Y Y 2011
I certify that I have examined this Report and to the	e best of my knowledge and belief	f it is true, correct and complete.
Type or Print Name of Treasurer Kathryn Damato		
Signature of Treasurer Kathryn Damato	[Electronically Fi	led] Date 03 06 2013
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.		
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